
April 2021
Agenda

PART I: COVID-19 Policy Overview
- Eligibility Overview
- Safe Opening and Operations Policy
- Medical Care Policy (V2)

PART II: Equitable Pandemic Response and Recovery Requirements
- General Equity Provisions
- Reporting Requirements for Vaccine Administration
Public Assistance Eligibility Overview
Once a disaster has been declared, multiple layers of government work in partnership to administer the PA Program:

- **FEMA**: The federal awarding agency authorized to manage the program.
- **Recipients**: The State, Territorial, or Tribal government that receives funding under the disaster declaration and disburses funding to approved subrecipients.
- **Applicants**: Entities submitting a request for assistance under the Recipient’s federal award.
- **Subrecipients**: Applicants who have received a subaward from the Recipient and are then bound by the conditions of the award and subaward.
Basic eligibility determinations are based on a bottom-up review of the PA Eligibility Pyramid:
1. Is the Applicant eligible under PA (SLTT or PNP)?
2. Is the facility eligible under PA?
   - For SLTTs, facility eligibility is tied to eligible disaster damages for facilities in an area designated for PA
   - For PNPs, facility eligibility is also tied to the facility providing an eligible service
3. Is the work required as a result of the declared event?
4. Are the claimed costs related to eligible work both necessary and reasonable?
Eligibility of PNPs and Government Applicants is determined differently, though the same criteria are considered for all damages. The ownership of the facility, type of services the PNP provides, and the population served are all part of the eligibility determination.
Public Assistance COVID-19 Overview and General Eligibility Considerations
General Eligibility Considerations for COVID-19

- Work must be the legal responsibility of an eligible applicant.
  - Measures to protect life, public health, and safety are generally the responsibility of SLTT governments.

- Legally-responsible SLTT governments may enter into formal agreements or contracts with private organizations, including PNP organizations.

- For COVID-19 declarations only, FEMA is waiving the primary use and primary ownership requirements for PNPs.

- For all COVID-19 declarations, FEMA has extended the deadline for emergency work indefinitely and will notify applicants no less than 30 days prior to establishment of the deadline.
Additional Considerations – Allowability of Costs

- To be eligible, claimed costs must be necessary and be reasonably pursuant to federal regulations and federal cost principles including:
  - Not exceeding that which would be incurred by a prudent person under the circumstances prevailing at the time;
  - Conforming to standard PA program eligibility and other federal requirements;
  - Following established practices, policies, and procedures that apply when federal funding is not available; and
  - Documenting with sufficient detail.
Additional Considerations – Duplication of Benefits

- FEMA is prohibited from providing financial assistance where such assistance would duplicate funding available from another program, insurance, or any other source for the same purpose including:
  - Assistance provided by other federal departments and agencies
  - Funding for clinical care costs funded by another source

- At no time will FEMA request or accept any Personally Identifiable Information related to the medical care of individual COVID-19 patients.

- FEMA will reconcile final funding based on any funding provided by another agency or covered by insurance or any other source for the same purpose.
Additional Considerations – Cost Share

- The federal cost share under PA for all COVID-19 declarations was increased from 75% to 100% for all eligible work already performed or to be performed from January 20, 2020 through September 30, 2021.

- For previously awarded projects, FEMA will obligate additional funding to increase the federal cost share from 75% to 100%.
Public Assistance vs. Other Programs of Federal Assistance

- Applicants should determine which source of funding best meets the need.
- If an eligible applicant applies for PA funding and then determines it will instead seek funding from another federal agency, the applicant should notify FEMA as soon as possible.
  - PA should not be considered funding of last resort
  - PA should be considered concurrently with other federal programs and sources
- FEMA has determined that it will not provide reimbursement through the PA program for certain types of work that may be eligible for funding under another agency’s authorities.
September 1, 2020 Eligibility Policy

- FEMA released a policy on September 1, 2020 defining the scope of eligible work and costs for COVID-19.

- The policy is applicable to work performed on or after September 15, 2020.

- It specified that only emergency protective measures specific to responding to COVID-19 were eligible, specifically citing eligible emergency work at Section C.4.

- Additional ancillary measures are provided at Section C.5 (e.g., disinfection and screening) and are only eligible, when necessary, to support eligible emergency work defined at Section C.4.

- This policy is still in effect where the eligible work and costs defined at Sections C.4 and C.5 are still applicable; however, the Safe Opening and Operations Policy allows certain measures for all Applicants to support reopening and daily operations in a pandemic environment from January 21, 2021 to September 30, 2021.
## COVID-19 Public Assistance Eligible Work – Comparison Table

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<td>Clinical Care for COVID patients</td>
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<td>Vaccination</td>
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<td>Alternate Care Sites &amp; Community Testing Sites</td>
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<td>Contact Tracing Disease &amp; Research</td>
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<td>Personal Protective Equipment</td>
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<td>Cleaning &amp; Disinfecting</td>
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<td>Screening incl. Testing &amp; Temp. Checks</td>
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<td>Temp. Physical Barriers</td>
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<td>Virtual Operations</td>
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<td>Non. Cong. Sheltering</td>
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<td>Emergency Feeding</td>
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</table>

**Legend**

- ✔️ Eligible Work
- ▲ Limited Eligibility with Specific Documentation
- ▲ Very Limited Eligibility with Specific Criteria
- ✗ Ineligible Work
COVID-19 Safe Opening and Operation Policy
On January 21, 2021, the President issued the “Memorandum to Extend Federal Support to Governors’ Use of the National Guard to Respond to COVID-19 and to Increase Reimbursement and Other Assistance Provided to States.”

FEMA issued a policy on April 5, 2021 implementing the increase in eligibility for funding under the Public Assistance Program for safe opening and operation costs, as authorized by the Presidential Memo.
Safe Opening and Operation Policy – Applicability

- **Timeframe**
  - Applies to work performed from January 21, 2021, through September 30, 2021, to support the safe opening and operations of PA-eligible facilities.
  - Work that is otherwise eligible under the COVID-19 Work Eligible for Public Assistance Interim Policy remains eligible for assistance.

- **Cost Share**
  - FEMA is funding the entire cost (i.e., 100% federal share) for the measures included in this policy.
Safe Opening and Operation Policy – Eligible Costs

- FEMA may provide assistance to all eligible PA applicants, including SLTTs and eligible PNPs, for the following measures implemented to facilitate the safe opening and operation of eligible facilities:
  - Purchase and distribution of cloth face coverings and PPE;
  - Cleaning and disinfection;
  - COVID-19 testing;
  - Screening and temperature scanning;
  - Acquisition and installation of portable temporary physical barriers; and
  - Purchase and storage of PPE and other supplies based on projected needs.
COVID-19 Medical Care Policy (Version 2)
Medical Care Costs Eligible for Public Assistance – Background

- For COVID-19, SLTT government entities and certain PNP organizations are eligible to apply for PA for COVID-related medical care.

- The updated version of the policy issued on March 16, 2021, supersedes the previous version that was issued on May 9, 2020.

- Medical care and associated costs refer to assistance to support the provision of medical care, including eligible facility, equipment, supplies, staffing, and wraparound services as well as assistance for clinical care of patients not covered by another funding source.
Medical Care Costs Eligible for Public Assistance – Eligibility

- Eligible PA Applicants under the COVID-19 emergency declaration or any subsequent COVID-19 major disaster declaration include:
  - SLTT government entities; and
  - PNP organizations that own and/or operate medical facilities, as defined in Title 44 of the Code of Federal Regulations (44 C.F.R.) §206.221(e)(5).

- This policy does not apply to any other emergency or major disaster declaration.
Medical Care Costs Eligible for Public Assistance Policy – Facility Type

- **Primary Medical Care Facility – Ongoing Eligibility**
  - Emergency and inpatient clinical care for COVID-19 patients only;
  - Purchase/lease and delivery of specialized medical equipment necessary to respond to COVID-19;
  - Purchase and delivery of Personal Protective Equipment (PPE), durable medical equipment, and consumable medical supplies necessary to respond to COVID-19;
  - Medical waste disposal related to COVID-19;
  - Certain labor costs; and
  - Increased operating costs for administrative activities (e.g., medical billing) are not eligible.
Medical Care Costs Eligible for Public Assistance Policy – Facility Type

- **Temporary and Expanded Medical Facilities**
  - Lease, purchase, or construction costs of a temporary facility as well as alterations to a facility necessary to provide medical care services, as reasonable and necessary;
  - Mobilization and demobilization costs;
  - Operating costs including equipment, supplies, staffing, wraparound services, and clinical care (COVID and non-COVID) not covered by another funding source; and
  - Maintenance of a temporary or expanded medical facility in an operationally ready but unused status available for surge capacity (“Warm Sites”).
The updated version of the policy includes work and associated costs to support the distribution and administration of COVID-19 vaccines may be eligible for PA.

- The cost of the vaccine itself is covered by the federal government.
- Additional costs to support the distribution and administration of the vaccine may be eligible under PA when consistent with established vaccine protocols, CDC and/or other applicable public health guidance, and PA program requirements.
Vaccination Eligible Work and Costs (1 of 6)

- Community Vaccination Sites

- Facility support costs, including leasing space, utilities, maintenance, and security (for temporary facilities only)

- PPE, other equipment, and supplies required for storing, handling, distributing, transporting, and/or administering COVID-19 vaccinations, such as:
  - Equipment includes coolers, freezers, temperature monitoring devices, and portable vaccine storage units for transportation;
  - Supplies include emergency medical supplies and sharps containers; and
  - Transportation support such as refrigerated trucks and transport security.
Vaccination Eligible Work and Costs (2 of 6)

- Additional staff, including medical and support staff
- Resources to support mobile COVID-19 vaccination in remote areas and/or transportation support for individuals with limited mobility, including:
  - Equipment and supplies necessary to support mobile vaccination units;
  - Medical and support staff for mobile vaccination units; and
  - Transportation to and from vaccination sites for individuals with limited mobility.
  - “Limited mobility” means any individual that cannot get to and from vaccinations sites without transportation assistance (due to physical disabilities, economic hardships, or other factors that may hinder an individual’s ability to get to and from a vaccination site without assistance).
Vaccination Eligible Work and Costs (3 of 6)

- Onsite infection control measures and emergency medical care for COVID-19 vaccine administration sites, including:
  - Masks/cloth facial coverings for patients;
  - Disinfection of facility and equipment in accordance with CDC guidance;
  - Temperature scanning;
  - Acquisition and installation of portable temporary physical barriers;
  - Medical waste disposal related to vaccinations; and
  - Onsite emergency medical care.
Vaccination Eligible Work and Costs (4 of 6)

- Communications to disseminate public information regarding vaccinations including translation and interpretation services as necessary (including call centers or websites when reasonable and necessary)

- Training and technical assistance specific to the proper storage, handling, distribution, and/or administration of COVID-19 vaccines in accordance with CDC guidance

- Vaccine-related costs incurred by a Federally Qualified Health Center (FQHC), Rural Health Clinics, and Critical Access Hospitals (not covered by HHS or another funding source)
Vaccination Eligible Work and Costs (5 of 6)

- Information Technology (IT) equipment and systems for patient registration and tracking, vaccine-related inventory management, and/or analytics and reporting needs.
  - To the extent possible, vaccine providers should utilize existing IT systems and processes.
  - The CDC developed the Vaccine Administration Management System (VAMS) for jurisdictions and healthcare providers that do not have existing IT systems for vaccination management.
  - In the event existing IT systems and VAMS are both inadequate to meet the needs of vaccine providers, IT equipment and systems necessary for the distribution and administration of COVID-19 vaccines are eligible for PA.
Vaccination Eligible Work and Costs (6 of 6)

- PA may provide funding for costs that are not paid for by another funding source, such as other Federal programs or insurance, including Medicare and Medicaid.

- Applicants are expected to follow their regular patient billing procedures where those may apply.

- SLTT governments administering COVID-19 vaccinations are not required to establish and implement new patient billing systems where they did not have them previously.
Questions?

FEMA-Recovery-PA-Policy@fema.dhs.gov
Public Assistance COVID-19: Equity Requirements
On January 21, 2021, the President issued the “Executive Order on Ensuring an Equitable Pandemic Response and Recovery,” which stated:

- COVID-19 has a disproportionate impact on communities of color and other underserved populations.
- SLTT governments must focus the use of FEMA funding on the highest-risk and hardest-hit communities and underserved populations.
- SLTT governments must prioritize limited resources to ensure an equitable pandemic response.
- The distribution of disaster relief must be accomplished in an equitable and impartial manner without discrimination.
Governing Laws and Executive Orders

- Title VI of the Civil Rights Act of 1964
- The Education Amendments Act of 1972
- The Rehabilitation Act of 1973
- The Age Discrimination Act of 1975
- The Robert T. Stafford Disaster Relief and Emergency Act (Stafford Act) of 1988
- Americans with Disabilities Act of 1990
- EO 12898, Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations
- EO 13166, Improving Access to Persons with Limited English Proficiency
- EO 13985, Advancing Racial Equity
- EO 13988, Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation
- EO 13994, Ensuring a Data-Driven Response to COVID-19
- EO 13995, Ensuring an Equitable Pandemic Response and Recovery
- EO 14002, Economic Relief Related to COVID-19
- EO 14008, Tackling the Climate Crisis
COVID-19 Equity: General Requirements

General equity provision applies to all COVID-19 medical care and opening and operating work:

“As a condition of receiving this financial assistance, Recipients and Subrecipients must focus the use of FEMA funding on the highest-risk communities and underserved populations as determined by established measures of social and economic disadvantage (e.g., the CDC Social Vulnerability Index). Recipients and Subrecipients must prioritize limited resources to ensure an equitable pandemic response. Failure to adhere to this policy could result in funding reductions and/or delays.”

(Emphasis added)

FEMA Policy #104-21-0004: Coronavirus (COVID-19) Pandemic Medical Care Eligible for Public Assistance (Medical Care Policy) Section B.3.c., March 2021.
Complying with Equity Provisions

- DHS’ Civil Rights Evaluation Tool
- FEMA’s Civil Rights Considerations During COVID-19 Vaccine Distribution Efforts
Equitable Vaccine Administration: Information Requirements

- Medical Care Policy (V2) includes specific data collection and reporting requirements for Recipients and Subrecipients, including SLTTs and PNPs, vaccine administration:
  - “Recipients and Subrecipients of FEMA assistance shall collect data on race, ethnicity and disability status.” *(Medical Care Policy Section C.3.k.i.)*
    - FEMA will not request, and Recipients and Subrecipients should not submit to FEMA, personally identifiable information.
  - Recipients and Subrecipients must submit information every 30 days for ongoing work:
    - Social Vulnerability Index or similar index score for each site.
    - Description of how the location of each site best advances FEMA’s focus on supporting the highest-risk communities.
    - Strategy to operationalize equitable access at each site.
<table>
<thead>
<tr>
<th>Vaccine Administration Information Requirements</th>
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<thead>
<tr>
<th>Vaccination Work Status</th>
<th>Group</th>
<th>Project Application and Vaccination Funding Status</th>
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<tbody>
<tr>
<td>All vaccination work is complete</td>
<td>1</td>
<td>FEMA has already obligated funding for vaccination work</td>
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<td>One submission no later than 4/14/21 (30 days from issuance of the Medical Care Policy)</td>
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<td>Recipient/Subrecipient has applied, but FEMA has not yet obligated</td>
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<td>One submission, within 30 days of obligation</td>
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<td>Recipient/Subrecipient has not yet applied</td>
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<tr>
<td></td>
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<td>One submission, with initial request for FEMA vaccination funding</td>
</tr>
</tbody>
</table>

| Vaccination work not yet complete | 2     | FEMA has already obligated funding for vaccination work |
|                                   |       | First submission no later than 4/14/21 (30 days from issuance of the Medical Care Policy), updates every 30 days until work is complete |
|                                   |       | Recipient/Subrecipient has applied, but FEMA has not yet obligated |
|                                   |       | First submission within 30 days of obligation, updates every 30 days until work is complete |
|                                   |       | Recipient/Subrecipient has not yet applied |
|                                   |       | First submission within 30 days of obligation, updates every 30 days until work is complete |
## Vaccine Administration Information Requirements

<table>
<thead>
<tr>
<th>Vaccine Work Status</th>
<th>Group 1 (Recip/ Subrecipient has applied, but FEMA has not yet obligated)</th>
<th>Group 2 (Recipient/Subrecipient has not yet applied)</th>
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<tbody>
<tr>
<td>All vaccination work is complete</td>
<td>One submission no later than <strong>4/14/21</strong> (30 days from issuance of the Medical Care Policy)</td>
<td>One submission, within 30 days of obligation</td>
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<tr>
<td>Vaccination work not yet complete</td>
<td>First submission no later than <strong>4/14/21</strong> (30 days from issuance of the Medical Care Policy), updates every 30 days until work is complete</td>
<td>First submission within 30 days of obligation, updates every 30 days until work is complete</td>
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Vaccine Administration Information Requirements

- Social Vulnerability Scores
  - Recipients/Subrecipients must provide for every site
  - Can be CDC Social Vulnerability Index or other, similar score

- Vaccine Administration Strategy:
  - Outreach and Engagement
  - Registration Process
  - Vaccine Site Selection
  - Site Accessibility
  - Evaluation and Continuous Improvement
## Vaccine Administration Information Considerations

<table>
<thead>
<tr>
<th>Component</th>
<th>Considerations may include...</th>
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| Outreach and Engagement                | • Engagement with community leaders and community-based organizations  
• Engagement events accessible to individuals with disabilities or limited English proficiency |
| Registration Process                   | • Prioritization of minoritized, marginalized, and other disadvantaged groups  
• Support to meet scheduled appointments |
| Vaccine Site Selection                  | • Identifying populations with socioeconomic status barriers, individuals with disabilities, minority status, and limited English proficiency  
• Housing and transportation barriers |
| Site Accessibility                     | • Access for individuals with disabilities or limited English proficiency  
• Assistive technology  
• Accessibility by transportation |
| Evaluation and Continuous Improvement  | • Evaluating approach to equitable vaccine administration  
• Tactical adjustments to improve equity |
Submitting Information Requirements

- Upload information via [PA Grants Portal](https://www.grantshub.gov)

- Information submission format options:
  - Use FEMA-provided [template](https://www.bestpractices.gov)
  - Provide pre-existing report/status update, such as CDC report

- Information submissions must be updated monthly for as long as vaccine work is ongoing.
Reviewing Vaccine Information Submission

FEMA reviews vaccine information submissions monthly to ensure:

- Submissions are provided on time
- Submissions are complete and address each required component
- Vaccine strategies comply with civil rights laws and lead to equitable outcomes

Note: Recipients should review Subrecipient submissions per the FEMA-State/Tribal Agreement and identify where Subrecipient’s narrative information fits into the Recipient’s overall equitable vaccine administration strategy.
Progressive Remedies: Missing or Incomplete Information

- If information is not submitted or is incomplete:
  - FEMA will issue a Request for Information (RFI) requesting the specific missing information
  - Recipients/Subrecipients have 7 days to respond to the RFI
- If information is not received by the RFI deadline, FEMA denies or de-obligates funding.
Progressive Remedies: Indications of Inequity

- FEMA works with the Recipient/Subrecipient to identify actions to address areas of concern.
  - FEMA’s Office of Equal Rights will work with PA and Recipient/Subrecipient staff to identify courses of actions, monitor actions taken, and document progress.
  - FEMA’s primary goal is ensuring vaccine operations are equitable.
- If actions are not taken or are insufficient:
  - FEMA implements initial remedies under Title 2 Code of Federal Regulations (C.F.R.) § 200.208 Specific Conditions that may include requiring payments as reimbursements, withholding authority to proceed, or requiring additional financial reports or project monitoring.
  - FEMA may implement further remedies under in 2 CFR § 200.339, Remedies for Noncompliance that may include temporarily withholding payments, denying or deobligating funding, or suspending or terminating the award.
Tips and Best Practices

- Coordinate with state/local health department for existing guidance on promoting health equity.
- Engage with community and faith-based organizations to identify needs and develop strategies.
- Leverage existing equitable vaccine administration plans and strategies.
- If you don’t know, ask the group that does!
Equity Resources

- Equitable COVID-19 Response and Recovery Recipient and Subrecipient Job Aid
- Department of Homeland Security’s Civil Rights Evaluation Tool
- FEMA’s Civil Rights Considerations During COVID-19 Vaccine Distribution Efforts
Questions?

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